

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Managed Care Reform and Patient Rights Act  
5 is amended by changing Section 45.1 as follows:

6 (215 ILCS 134/45.1)

7 Sec. 45.1. Medical exceptions procedures required.

8 (a) Notwithstanding any other provision of law, on or after  
9 the effective date of this amendatory Act of the 99th General  
10 Assembly, every insurer licensed in this State to sell a policy  
11 of group or individual accident and health insurance or a  
12 health benefits plan shall ~~Every health carrier that offers a~~  
13 ~~qualified health plan, as defined in the federal Patient~~  
14 ~~Protection and Affordable Care Act of 2010 (Public Law~~  
15 ~~111 148), as amended by the federal Health Care and Education~~  
16 ~~Reconciliation Act of 2010 (Public Law 111 152), and any~~  
17 ~~amendments thereto, or regulations or guidance issued under~~  
18 ~~those Acts (collectively, "the Federal Act"), directly to~~  
19 ~~consumers in this State shall~~ establish and maintain a medical  
20 exceptions process that allows covered persons or their  
21 authorized representatives to request any clinically  
22 appropriate prescription drug when (1) the drug is not covered  
23 based on the health benefit plan's formulary; (2) the health

1 benefit plan is discontinuing coverage of the drug on the  
2 plan's formulary for reasons other than safety or other than  
3 because the prescription drug has been withdrawn from the  
4 market by the drug's manufacturer; (3) the prescription drug  
5 alternatives required to be used in accordance with a step  
6 therapy requirement (A) has been ineffective in the treatment  
7 of the enrollee's disease or medical condition or, based on  
8 both sound clinical evidence and medical and scientific  
9 evidence, the known relevant physical or mental  
10 characteristics of the enrollee, and the known characteristics  
11 of the drug regimen, is likely to be ineffective or adversely  
12 affect the drug's effectiveness or patient compliance or (B)  
13 has caused or, based on sound medical evidence, is likely to  
14 cause an adverse reaction or harm to the enrollee; or (4) the  
15 number of doses available under a dose restriction for the  
16 prescription drug (A) has been ineffective in the treatment of  
17 the enrollee's disease or medical condition or (B) based on  
18 both sound clinical evidence and medical and scientific  
19 evidence, the known relevant physical and mental  
20 characteristics of the enrollee, and known characteristics of  
21 the drug regimen, is likely to be ineffective or adversely  
22 affect the drug's effective or patient compliance.

23 (b) The health carrier's established medical exceptions  
24 procedures must require, at a minimum, the following:

25 (1) Any request for approval of coverage made verbally  
26 or in writing (regardless of whether made using a paper or

1 electronic form or some other writing) at any time shall be  
2 reviewed by appropriate health care professionals.

3 (2) The health carrier must, within 72 hours after  
4 receipt of a request made under subsection (a) of this  
5 Section, either approve or deny the request. In the case of  
6 a denial, the health carrier shall provide the covered  
7 person or the covered person's authorized representative  
8 and the covered person's prescribing provider with the  
9 reason for the denial, an alternative covered medication,  
10 if applicable, and information regarding the procedure for  
11 submitting an appeal to the denial.

12 (3) In the case of an expedited coverage determination,  
13 the health carrier must either approve or deny the request  
14 within 24 hours after receipt of the request. In the case  
15 of a denial, the health carrier shall provide the covered  
16 person or the covered person's authorized representative  
17 and the covered person's prescribing provider with the  
18 reason for the denial, an alternative covered medication,  
19 if applicable, and information regarding the procedure for  
20 submitting an appeal to the denial.

21 (c) Notwithstanding any other provision of this Section,  
22 nothing in this Section shall be interpreted or implemented in  
23 a manner not consistent with the Federal Act.

24 (Source: P.A. 98-1035, eff. 8-25-14.)